Discussion

Letter prepared for by:FALK
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Plan

Anatomical narrow angle of both eyes | H40.033 | Gonio today - borderline occlduable, IOP after dilation with minor change only OD (19---23), will monitor for now. Repeat gonio in 3 months, consider LPI OD first if any worsening. Signs aond symptoms of acute angle closure discussed.

Age-related nuclear cataract, bilateral[H25.13 R/b of cataract surgery discussed, he wants to think about procedure. Continue to Monitor Try Rx before Cat Sx $^{\circ}$

Hypermetropia of both eyes|H52.03

Bilateral presbyopia | H52.4

Left amblyopia|H53.002 HIgh hypermetropia OS, anisomteropia, likley amblyopia OS (states that vision OS decreased since childhood). Ok with current glasses. See above. created by:Iryna Falkenstein, M.D.

FOLLOWUP SCHEDULED:

PLEASE ADD THE FOLLOWING REFERRAL DOCTOR: SVERDLOV, DINA MD ERIKA Return Visit - 2 months or PRN iop check Gonioscopy

Iryna Falkenstein, M.D. DOCUMENT CREATE DATE: 01/11/2018 12:10:07 PM

Account:27245 MORGOVSKY, NAUM DOB: 9/23/1949 Todays Date:08/15/18 13:28

Date:01/11/2018 Page 3 of 3

Morgovsky, Naum

MRN: 57329512

Office Visit 8/27/2018

Provider: Filer, Robert Stephen, MD (Ophthalmology)

Pacific Eye Specialists Primary diagnosis: Anatomical narrow angle

Reason for Visit: Glaucoma follow up; Referred by Sverdlov, Dina, MD

Progress Notes

Filer, Robert Stephen, MD (Physician) • Ophthalmology

Impression: (H40.039) Anatomical narrow angle (primary encounter diagnosis)

(H40.051) Ocular hypertension of right eye

(H25.13) Age-related nuclear cataract of both eyes

Plan: Return in about 6 months (around 2/27/2019) for GLAUCOMA, FOLLOW UP, VF, SDP. Warning signs and symptoms of retinal detachment discussed at length with the patient. The patient knows to call immediately in the event of any new signs or symptoms. No outpatient prescriptions have been marked as taking for the 8/27/18 encounter (Office Visit) with Filer, Robert Stephen, MD.

HPI

Follow up patient with history of ? Narrow angles here for recheck. Patient with no new ophthalmic complaints at present.

Last edited by Filer, Robert Stephen, MD on 9/17/2018 12:17 PM. (History)

ROS

Negative for: Constitutional, Gastrointestinal, Neurological, Skin, Genitourinary, Musculoskeletal, HENT, Endocrine, Cardiovascular, Eyes, Respiratory, Psychiatric, Allergic/Imm, Heme/Lymph Last edited by Filer, Robert Stephen, MD on 9/17/2018 12:17 PM. (History)

Base Eye Exam

Visual Acuity (Snellen - Linear)			Pupils			
	Right	Left	Pupils		APD	
Dist cc	20/25	20/30	Right	PERRL	١	lone
Tonometi	y (Applanatio	on, 9:25 AM)	Left	PERRL	١	lone
	Right	Left	Extraocular Movement			
Pressure	22	19		Right		Left
Pachymet	ry (9/17/2018	3)		Full		Full
	Right	Left	Neuro/Psych			
Thickness	561	581	Oriented x3: Yes			
Goniosco	ру		Mood/	'Affect: Normal		
20000011111111111111111111111111111111	Right	Left				
Temporal	Grade 2	Grade 2				
Nasal	Grade 3	Grade 3				
Superior	Grade 3	Grade 3				
Inferior	Grade 3	Grade 3				
Slightly ste	ep approach Ol	U				

Edited by: Filer, Robert Stephen, MD

Slit Lamp and Fundus Exam

External Exam				
and product the professional control to the control of the control	Right	Left		
External	Brow ptosis	Brow ptosis		
Slit Lamp Exam				
K, Lapadinia melamina (1538-1956) dan Rapidania (1535-155) membenduan disensi adi meleberah	Right	Left		
Lids/Lashes	Dermatochalasis	Dermatochalasis		
Conjunctiva/Sclera	Pinguecula	Pinguecula		
Cornea	Anterior basement membrane dystrophy superiorly OD>OS, Arcus senilis	Anterior basement membrane dystrophy superiorly OD>OS, Arcus senilis		
Anterior Chamber	Deep and quiet	Deep and quiet		
Iris	Round and reactive	Round and reactive		
Lens	3+ Nuclear sclerosis centrally	3+ Nuclear sclerosis centrally		

Edited by: Filer, Robert Stephen, MD

Instructions

Return in about 6 months (around 2/27/2019) for GLAUCOMA, FOLLOW UP, VF, SDP.

Return in about 6 months (around 2/27/2019) for GLAUCOMA, FOLLOW UP, VF, SDP. Patient with minimally narrowed angles with likely phacomorphic component. No indication at this point for PI's. Will recheck in 6 months, earlier PRN.

Additional Documentation

Encounter Info: Billing Info, History, Allergies, Detailed Report

Orders Placed

PR US CORNEAL PACHYMETRY
PR SPECIAL EYE EVAL GONIOSCOPY

Medication Changes

As of 9/17/2018 12:16 PM

None

Visit Diagnoses

Anatomical narrow angle H40.039 Ocular hypertension of right eye H40.051 Age-related nuclear cataract of both eyes H25.13